

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 091763294 FILING DATE 21 FEB 2001

APPLICANT(S) *Miyama*

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* IND.	* DEP.	* IND.	* DEP.	* IND.	* DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1		/					51					
2			/				52					
3			/				53					
4			/				54					
5			/				55					
6			/				56					
7			/				57					
8			/				58					
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12			/				62					
13			/				63					
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15			/				65					
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41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.			/				TOTAL IND.					
TOTAL DEP.			14				TOTAL DEP.					
TOTAL CLAIMS			15				TOTAL CLAIMS					